## **TEMPORARY STRUCTURE PERMIT APPLICATION**

PERMIT NUMBER: STR —		DROP OFF #
A. ADDRESS:	K. INSTALLATION DATE/TIME:REMOVAL DATE/TIME:	
B. APPLICANT INFORMATION:  NAME:  ADDRESS:  CITY STATE ZIP CODE  TELEPHONE NUMBER: ()  EMAIL:  C. EMERGENCY CONTACT (responsible for declaring evacuation of tent):  NAME:  ADDRESS:	- Tent location - Location of adjacent - Adjacent vegetation - Locations of guys wi - Access location and - Fire breaks (if applic  [ ] Floor plans including - Seating capacity and - Required exits, egre - Electrical distribution - Locations and types and other miscelland - Heating and cooking  [ ] Manufacturer's speci	e scale including the following:  It permanent structures and lot lines  ires, guy ropes, and other supports I parking cable) I the following: I d arrangement I sess illumination, aisles, exit signs I equipment I of all appliances, generators,
CITY STATE ZIP CODE  TELEPHONE NUMBER: ()  EMAIL:	M. ANCHORAGE (For multiple to anchorage documentation)  Structure: [ ] Pole [ ]  Type: [ ] Stake [	
D. PERMIT TYPE:  [ ] TENT [ ] CANOPY [ ] OTHER  E. # OF TEMP STRUCTURES ON SITE ASSOCIATED WITH THIS PERMIT:	THE WORK FOR WHICH THIS	EN OR WILL BE HIRED TO DO S PERMIT IS REQUESTED, HE/ RION COUNTY AND MUST COM-
F. TEMP STRUCTURE(S) AREA (SQ FT):	Business Listing Number  Upon scheduling of final inspection, I will hereby acknowledge that the construction activity associated with the pursuant building permit has been completed and to the best of my knowledge, information and belief such construction activity has been performed in conformance with the Building Standards and Procedures applicable to such construction. I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE  YOUR NAME (PRINT):  SIGNATURE:	
H. WIND THRESHOLD AT WHICH TENT WILL BE EVACUATED (may not be greater than 25 mph for unstaked tents or 30 mph for staked tents without engineered plans):  I. INTENDED USE/BASIC SCOPE OF WORK:		
J. Equipment (heater, cooking, generator, etc.):  [ ] Yes [ ] No  Make: Model	DATE: TELEPHONE NUMBER:(	or or Applicant)